

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective July 10, 2008.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$18,826,600	+5.0%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No, applies to all classes.

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

We are revising our rates, deviating from the National Council on
Compensation Insurance (NCCI). Preferred classes (listed on cover letter) are deviated +18% from NCCI advisory
rates. All other classes are deviated +25% from NCCI advisory rates.

*Adjusted to reflect all prior rate changes.

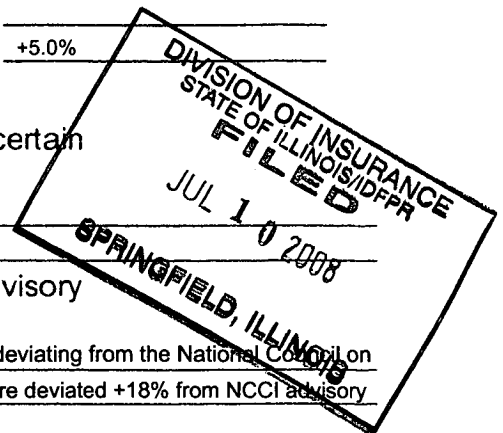
**Change in Company's premium level which will result from application of new
rates.

Auto-Owners Insurance Company

Name of Company

Jennifer L. Smith, Assistant Manager

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

RECEIVED

JUN -9 2008

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective 7/15/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	32,000	8.40%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): National Council on
Compensation Insurance Insurance ("NCCI"). Adoption of loss costs effective January 1, 2008 in NCCI Circular IL-2007-08

*Adjusted to reflect all prior rate changes.

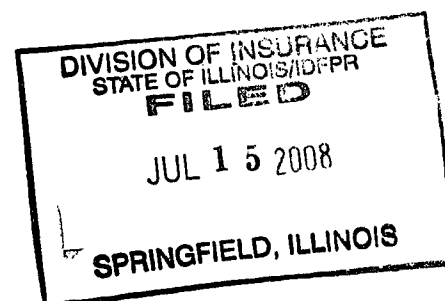
**Change in Company's premium level which will result from application of new rates.

DaimlerChrysler Insurance Company

Name of Company

James Haan, Vice President and General Manager

Official - Title



ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective DATE AS APPROVED

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	<u>1,600,000</u>	<u>+1%</u>
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

EXPENSE CONSTANT \$280

POLICY MINIMUM PREMIUM \$750

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

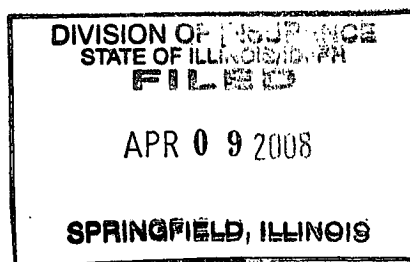
DALLAS NATIONAL INSURANCE COMPANY

Name of Company

LARRY MCGREGOR

Official — Title

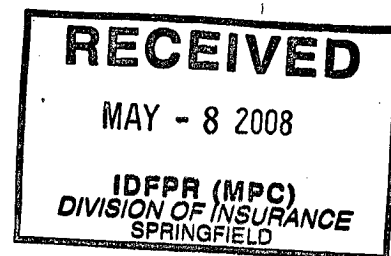
ASST. COMPLIANCE OFFICER



Section 754.EXHIBIT A Summary Sheet (Form RF-3)

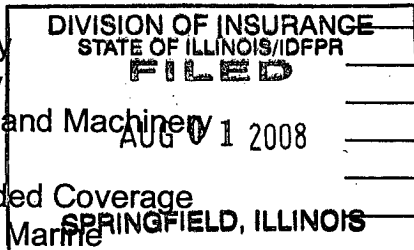
FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision
effective August 1, 2008.

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damag Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>443,143</u>	<u>+3.6%</u>
Life of Insurance		



Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adopt the NCCI current loss cost adjusted
by our current multipliers.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Iowa American Insurance
Name of Company

Beverly Barber - Compliance
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

RECEIVED

MAY - 8 2008

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision
effective August 1, 2008

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damag Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> <u>Life of Insurance</u>	<u>3,041,156</u>	<u>+3.6%</u>

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Adopt the NCCI current loss cost adjusted
by our current multipliers.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Iowa Mutual Insurance

Name of Company

Beverly Barber - Compliance

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

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SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective July 10, 2008.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$25,753,852	+5.7%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No, applies to all classes.

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): We are revising our rates, deviating from the National Council on
Compensation Insurance (NCCI). Preferred classes (listed on cover letter) are deviated +6% from NCCI advisory
rates. All other classes are deviated +13% from NCCI advisory rates.

*Adjusted to reflect all prior rate changes.

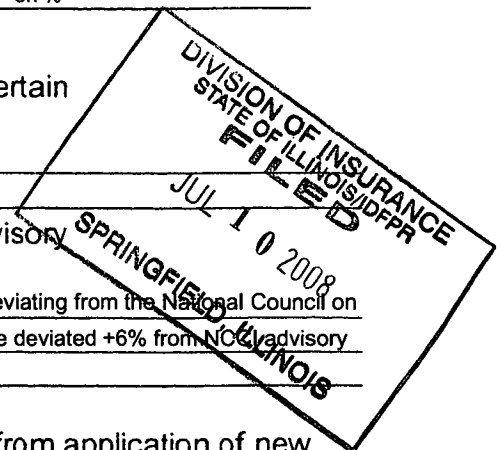
**Change in Company's premium level which will result from application of new
rates.

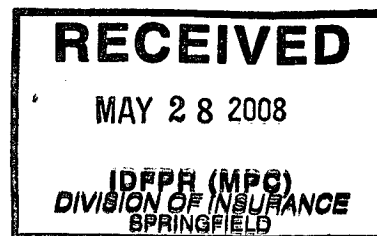
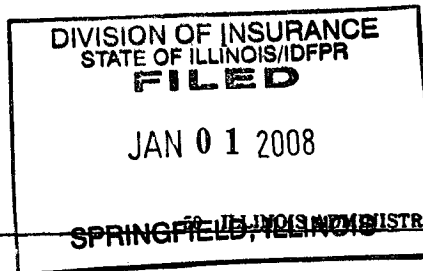
Owners Insurance Company

Name of Company

Jennifer L. Smith, Assistant Manager

Official - Title





ILLINOIS ADMINISTRATIVE CODE

CHAPTER I § 754
SUBCHAPTER I

Section 754. EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 6/1/2008.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> \$1,973,330		+4%
<u>Life of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of NCCI's voluntary rates and rating values effective 1/1/2008

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

State National Insurance Co.
Name of Company

Clay Johnson
Official--Title
First Partner, LLC per attached